

APPENDIX 1

Complaints lodging form

Ref. no _____

1. Complainant's Details (all information given is voluntary)

Name (Dr / Mr / Mrs / Ms)

ID Number _____

Postal address _____

Mobile _____

Email _____

County _____

Age _____

2. How did you get to know about the institution's complaints mechanism?

Newspaper

TV/Radio

Referral by friend

Other (please specify) _____

3. Which public institution or public officer are you complaining about?

Ministry/department/agency:

4. Have you reported this matter to any other public institution/ public official?

Yes

No

5. If yes, which one?
